

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 830460 RECEIPT DATE: 04 / 27 / 01
IA NUMBER: PCT/ GB99 / 03826 IA FILING DATE: 11 / 17 / 99
FAMILY NAME: CLARK DELAY WAIVED (Y/N): Y
GIVEN NAME: JONATHAN A DEMAND RECEIVED (Y/N): Y
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 11 / 27 / 98
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N
ATTORNEY DOCKET NUMBER: 36-1423 COUNTRY:
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000
FAX

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STATE/COUNTRY: VA ZIP: 222014714

EMAIL:

APPLICATION TITLES:

COMMUNICATIONS NETWORK

TAB TO LAST POSITION, PUSH SEND



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Bib Data Sheet

CONFIRMATION NO. 8071

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|--|---|--------------------------------|---|---------------------------------------|--------------------------------|
| SERIAL NUMBER 09/830,460 | FILING DATE 04/27/2001 RULE | CLASS 370 | GROUP ART UNIT 2661 2665 | ATTORNEY DOCKET NO. 36-1423 | |
| APPLICANTS Jonathan Andrew Clark, Suffolk, GBN; | | | | | |
| ** CONTINUING DATA ***** THIS APPLICATION IS A 371 OF PCT/GB99/03826 11/17/1999 | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>ys</i> EUROPEAN PATENT OFFICE (EPO) 98309757.7 11/27/1998 <i>ps</i> | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowance</i> Verified and Acknowledged <i>Examiner's Signature</i> Initials | | STATE OR COUNTRY GBN | SHEETS DRAWING 13 | TOTAL CLAIMS 9 | INDEPENDENT CLAIMS 1 |
| ADDRESS Nixon & Vandehye 8th Floor 1100 North Glebe Road Arlington, VA 22201-4714 | | | | | |
| TITLE Communications network | | | | | |
| FILING FEE RECEIVED 860 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |